PTO/SB/17 (10-08)

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| Effective on 12/08/2004. | | | | Complete if Known | | | | | | |
|--|---|---------------------------|--------------|-----------------------------|-------------|--------------------------|--------------|--------------|--|--|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | | | 10/680,265-Conf. #6382 | | | | |
| FEE TRANSMITTAL | | | | Filing Date | | October 7, 2003 | | | | |
| | | | | First Named Inventor | | Stefan Marinca | | | | |
| For FY 2009 | | | | Examiner Name | | Y. Rossoshek | | | | |
| Applican | Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit | | 2825 | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,920.00 | | | | Attorney Docket No. T0461. | | | 1.70041US00 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | |
| x Check Credit Card Money Order None Other (please identify): | | | | | | | | | | |
| Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C. | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | |
| 1. BASIC FILIN | G, SEARCH, AND E | | | · | | | | | | |
| | FI | LING FEES | | H FEES | EXAMI | NATION FEES | i | | | |
| Application T | ype Fee (\$ | Small Entity) Fee (\$) F | ee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees F | Paid (\$) | | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | | | | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | | | | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | | | | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | | | | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | | | | |
| 2. EXCESS CLA | | 110 | U | U | U | U | | Small Entity | | |
| Fee Description | - | | | | | | Fee (\$) | Fee (\$) | | |
| Each claim over | | | | | 52 | 26 | | | | |
| Each independent claim over 3 (including Reissues) | | | | | | | 220 | 110 | | |
| Multiple depend | | | | | 390 | 195 | | | | |
| Total Claims | Extra Claim | s Fee (\$) | Fee Pa | aid (\$) | <u>N</u> | lultiple Depend | lent Claims | | | |
| | - 20 or HP ber of total claims paid for | x = _ | | | <u>Fe</u> | e (\$ <u>)</u> | Fee Paid (\$ | <u> </u> | | |
| Indep. Claims | Extra Claims | | Fee Pa | aid (\$) | | | | - | | |
| | - 3 or HP = | х = | | | | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | |
| Total Sheet | <u>Extra Sheet</u> | <u>Number of </u> | each additle | onal 50 or frac | tion therec | of Fee (\$) | Fee | Paid (\$) | | |
| - 100 = /50 = (round up to a whole number) x = | | | | | | | | | | |
| · | 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | | |
| Non-English | Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,110.00 | | | | | | | | | |
| Other (e.g., late filing surcharge): 1200 Extension to responde Within this month. 1801 Request for continued examination (RCE) (see 37 810.00 | | | | | | | | | | |
| SUBMITTED BY | | | | | | | | | | |
| Signature | William 1 | e. mc Clelle | n Regi | istration No. mey/Agent) | 29,409 | Telephone | 617.646 | 3.8000 | | |
| Name (Print/Type) | William R. McCle | llan | | | | Date | November | 20, 2008 | | |
| | | | | | | | | | | |

| 7-140. | | |
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| Express Mail Label No. EM 130 480 657 US | Dated:11-20-2008 | |